Company, ...

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

Filing at a Glance

Companies: Metropolitan Property and Casualty Insurance Company, Economy Premier Assurance Company

Product Name: Payment Plans SERFF Tr Num: METX-125510642 State: Arkansas

TOI: 04.0 Homeowners SERFF Status: Closed State Tr Num: EFT \$25

Sub-TOI: 04.0000 Homeowners Sub-TOI Co Tr Num: HO AR00042CGR01 State Status: Fees verified and

Combinations

Filing Type: Rule Co Status: Reviewer(s): Becky Harrington,

Betty Montesi, Brittany Yielding

Author: Richard Collard Disposition Date: 02/27/2008

Date Submitted: 02/27/2008 Disposition Status: Filed

Effective Date Requested (New): 06/19/2008 Effective Date (New): 06/19/2008

07/24/2008

received

State Filing Description:

General Information

Project Name: Status of Filing in Domicile:
Project Number: HO AR00042CGR01 Domicile Status Comments:

Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:

Filing Status Changed: 02/27/2008

State Status Changed: 02/27/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Metropolitan filed and introduced a Recurring Credit Card payment option on February 15, 2007. Since that time, it has become an increasingly popular choice among our new business policyholders. Unfortunately, we are incurring an unplanned expense from the various credit card companies with whom we are transacting of approximately two percent

SERFF Tracking Number: METX-125510642 State: Arkansas

First Filing Company: Metropolitan Property and Casualty Insurance State Tracking Number: EFT \$25

Company, ...

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Product Name: Payment Plans
Project Name/Number: /HO AR00042CGR01

of each policy's premium. In researching this matter further, we have found that our major competitors, who are also offering this payment option, are offsetting their expenses by charging a monthly transaction fee. Therefore, in order to maintain our competitiveness in continuing to offer this payment option, we propose to begin charging a monthly transaction fee of two dollars (\$2.00) to partially offset a portion of our expenses incurred.

Company and Contact

Filing Contact Information

Mary Tilton, State Filings Specialist mtilton@metlife.com
700 Quaker Lane (401) 827-2035 [Phone]
Warwick, RI 02887 (401) 827-3929[FAX]

Filing Company Information

Metropolitan Property and Casualty Insurance CoCode: 26298 State of Domicile: Rhode Island

Company

700 Quaker Lane Group Code: 241 Company Type: Property and

Casualty

Warwick, RI 02887 Group Name: Metropolitan Property State ID Number:

and Casualty Insurance Company

(401) 827-2000 ext. [Phone] FEIN Number: 13-2725441

Economy Premier Assurance Company CoCode: 40649 State of Domicile: Illinois

700 Quaker Lane Group Code: 241 Company Type: Property and

Casualty

Warwick, RI 02887 Group Name: Metropolitan Property State ID Number:

and Casualty Insurance Company

(401) 827-2000 ext. [Phone] FEIN Number: 36-3105737

Filing Fees

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No

Fee Explanation:

SERFF Tracking Number: METX-125510642 State: Arkansas

First Filing Company: Metropolitan Property and Casualty Insurance State Tracking Number: EFT \$25

 $Company, \dots$

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

Per Company: No

SERFF Tracking Number: METX-125510642 State: Arkansas

First Filing Company: Metropolitan Property and Casualty Insurance State Tracking Number: EFT \$25

 $Company, \dots$

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Metropolitan Property and Casualty Insurance \$25.00 02/27/2008 18181077

Company

Company, ...

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	02/27/2008	02/27/2008

Company, ...

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

Disposition

Disposition Date: 02/27/2008 Effective Date (New): 06/19/2008 Effective Date (Renewal): 07/24/2008

Status: Filed Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing0.000%Overall Percentage Rate Impact For This Filing0.000%Effect of Rate Filing-Written Premium Change For This Program\$0Effect of Rate Filing - Number of Policyholders Affected0

SERFF Tracking Number: METX-125510642 State: Arkansas First Filing Company: Metropolitan Property and Casualty Insurance State Tracking Number: EFT \$25

 $Company, \dots$

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Rate

/HO AR00042CGR01 Project Name/Number:

Hama Tama	Itama Nama	Itama Otatura	Dublic Acces
Item Type	Item Name	Item Status	Public Access
Supporting Document	NAIC Loss Cost Filing Document for		No
•	OTHER than Workers' Comp		
Supporting Document	HPCS-Homeowners Premium		No
5	Comparison Survey		
Supporting Document	Uniform Transmittal Document-Proper	rty &Filed	Yes
	Casualty		
Rate	Payment Plan	Filed	Yes

 $Company, \dots$

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: METX-125510642 State: Arkansas
First Filing Company: Metropolitan Property and Casualty Insurance State Tracking Number: EFT \$25

 $Company, \dots$

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

Rate/Rule Schedule

Review Status: Exhibit Name: Rule # or Page Rate Action Previous State Filing Attachments

Number:

Filed Payment Plan Page 1 Replacement Page 1.PDF

METROPOLITAN PROPERTY AND CASUALTY INSURANCE COMPANY RESIDENTIAL PROPERTY PROGRAM ARKANSAS

PAYMENT PLANS

Payment plans for 12-month policies are applicable to the following companies:

METROPOLITAN PROPERTY AND CASUALTY INSURANCE COMPANY ECONOMY PREMIER ASSURANCE COMPANY

Payment Plan Type	Payment Plan Description	Premium Remaining/ Approximate Bill Date(s)		
1 Pay	100% of premium paid at application or by renewal effective date.	0%		
2 Pay	50% of total premium with application or by	0%		
Ziay	renewal effective date.	50%/Day 129		
4-Pay	25% of total premium with application or by			
	renewal effective date.	25%/Days 40,130 & 220		
9-Pay	25% of total premium with application or by renewal effective date.	9.375%/Billed every 31 days		
Flexible Payment	NEW BUSINESS - 20% of the total premium with the application. Eight additional monthly installments of 10% due in months 3-10.	10%/Monthly in months 3-10		
	RENEWAL BUSINESS - Installments of 10% billed over 10 months, with 1 st payment due by the renewal effective date. Used to bill a customer for an individual policy or account billing.	10%/Monthly over 10 months, 1 st payment by renewal effective date		
Payroll Deduction	A payroll deduction system designed to interface with payroll systems of franchise accounts doing business with Metropolitan.	Billed according to payroll system		
ExpressIt	Metropolitan will deduct monthly premium payments authorized by the insured from the insured's designated bank account.	Monthly/ Selected date		
Recurring	Metropolitan will bill monthly premium	Monthly/		
Credit Card	payments, authorized by the insured, to the insured's designated credit card.	Selected Date		
Home Account Bill*	Billed monthly			

^{*}Available to franchise accounts only.

Notes: A non-sufficient fund charge of \$20.00 is applicable to all installment payment plans.

- A late payment fee of \$25.00 is applicable to all installment payment plans.
- A processing fee of \$4.00 is applicable for payments two and subsequent.
- A monthly transaction fee of \$2.00 is applicable to the Recurring Credit Card Payment Plan.

Updated: June, 2008 Payment Plan Page 1

SERFF Tracking Number: METX-125510642 State: Arkansas
First Filing Company: Metropolitan Property and Casualty Insurance State Tracking Number: EFT \$25

Company, ...

Company Tracking Number: HO AR00042CGR01

TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Product Name: Payment Plans

Project Name/Number: /HO AR00042CGR01

Supporting Document Schedules

Review Status:

Satisfied -Name: Uniform Transmittal Document- Filed 02/27/2008

Property & Casualty

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

Property & Casualty Transmittal Document

1.	Reserved for Insurance D Use Only			partment Uses received:	e only				
	b. Analysi		•						
	c. Disposi								
				tion of the fili	ng:				
		e. Effectiv							
			New Bus	siness					
			Renewa	l Business					
		f. State F	ilina #:		I				
		g. SERFF		<u>!</u>					
		h. Subjec							
				1					
3.	Group Name							Group NAIC #	
	Metropolitan Property and Ca	sualty Insurance Co	ompany					241	
4.	Company Name(s)			Domicile	NAIC #	FEIN #	#	State #	
	Metropolitan Property and Ca	sualty Insurance							
	Company			RI	26298	13-2725441			
	Economy Premier Assurance	Company		IL	40649	36-310)5737		
5.	Company Tracking Number	HO AI	R000420	CGR01					
	ct Info of Filer(s) or Corporat				FAV	,,		11	
6.	Name and address	Title	ı elej	phone #s	FAX	#		e-mail	
		State Filings							
	Mary E. Tilton, AIS API	Specialist	800-2	257-5049	401-827-3929		mtilto	mtilton@metlife.com	
	700 Quaker Lane								
	Warwick RI 02887								
			Mary Tilton						
7.	7. Signature of authorized filer		7. 300 59 20 5/17						
8.	Please print name of author		Mary E. Tilton, AIS API						
Filing Information (see General Instructions for description 9. Type of Insurance (TOI)			04.0 Homeowners						
10. Sub-Type of Insurance (Sub-TOI)		04.0000 Homeowners Sub-TOI Combinations							
11. State Specific Product code(s) (if		55555 Fiorito-Wildio Sub For Goribinations							
	applicable) [See State Specific	Requirements]							
12. Company Program Title (Marketing Title)		Residential Property Program							
13.	13. Filing Type		Rate/Loss Cost Rules Rates/Rules						
			For					s/Rules/Forms	
			∐ VVit	hdrawal		ntner (giv	ve descri	otion)	
14.	Effective Date(s) Requested	<u> </u>	New:	06/10/2009	₹	Pan	owal· I o	7/24/2008	
15.	Reference Filing?	1	New: 06/19/2008 Renewal: 07/24/2008 ☐ Yes ☒ No						
16.	Reference Organization (if a	applicable)		, MINO					
17.	Reference Organization # &								
18.	Company's Date of Filing		2/26/0	8					
19.	Status of filing in domicile			t Filed	Pending	Aut	horized	Disapproved	

PC TD-1 pg 1 of 2 © 2007 National Association of Insurance Commissioners

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	HO AR00042CGR01

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

Metropolitan filed and introduced a Recurring Credit Card payment option on February 15, 2007. Since that time, it has become an increasingly popular choice among our new business policyholders. Unfortunately, we are incurring an unplanned expense from the various credit card companies with whom we are transacting of approximately two percent of each policy's premium. In researching this matter further, we have found that our major competitors, who are also offering this payment option, are offsetting their expenses by charging a monthly transaction fee. Therefore, in order to maintain our competitiveness in continuing to offer this payment option, we propose to begin charging a monthly transaction fee of two dollars (\$2.00) to partially offset a portion of our expenses incurred.

22. Filing Fees (Filer must provide check # and fee amount if applicable.)

[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: Amount:

Filing Fee will be submitted via Electronic Funds Transfer

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

PC TD-1 pg 2 of 2

^{****}Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)